

## PART B—ISSUE FEE TRANSMITTAL

and mail this form, together with applic

es, to: Box ISSUE FEE  
Assistant Commissioner for Patents  
Washington, D.C. 20231

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) indicating a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

MMC1/0609

THOMAS H CLOSE  
EASTMAN KODAK COMPANY  
PATENT LEGAL STAFF  
ROCHESTER NY 14650-2201

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

## Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

June P. Carfagna (Depositor's name)

June P. Carfagna (Signature)

August 28, 2000 (Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/358.811	07/22/99	011	TRAN. H	2861 06/09/00

1. Named Applicant: **SIWINSKI.** 35 USC 154(b) term ext. = 0 Davs.

OF THERMAL PRINT HEAD MODULATION USING ADDITIVE COMPLEMENTS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2 76585P-S	347-211.000	N67	UTILITY	NO	\$1210.00	09/11/00

Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

] Change of correspondence address (or Change of Correspondence Address form TO/SB/122) attached.

] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. William F. Noval

2. \_\_\_\_\_

3. \_\_\_\_\_

ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

a) NAME OF ASSIGNEE

EASTMAN KODAK COMPANY

b) RESIDENCE: (CITY &amp; STATE OR COUNTRY)

343 STATE STREET, ROCHESTER, NY 14650-2201

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

☐ Issue Fee☐ Advance Order - # of Copies \_\_\_\_\_

4b. The following fees or deficiency in these fees should be charged to:

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(ENCLOSE AN EXTRA COPY OF THIS FORM)

☒ Issue Fee☐ Advance Order - # of Copies \_\_\_\_\_

COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

Authorized Signature)

Thomas H. Close

(Date)

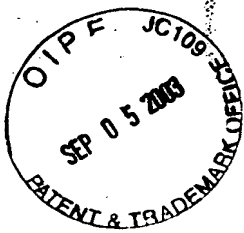
8/28/00

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

**Estimated Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE



Inventor(s)

*Siwinski*

Serial No.

*09/358,811*

Paper Submitted

*Issue Fee Form*

Sender (Initial)

*WFN/JPC*

Docket/CCC:

*76585*

US PATENT & TRADEMARK  
OFFICE

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PATENT MAINTENANCE  
DIVISION

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Patent Legal Staff



76585WFN  
Customer No. 01333

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:

Michael J. Siwinski

THERMAL PRINT HEAD  
MODULATION USING ADDITIVE  
COMPLEMENTS

Serial No. 09/358,811

Filed 22 July 1999

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA. 22313-1450

Sir:

Group Art Unit: 2861

Examiner: H. Tran

I hereby certify that this correspondence is being  
deposited today with the United States Postal  
Service as first class mail in an envelope addressed  
to Commissioner For Patents, P.O. Box 1450,  
Alexandria, VA 22313-1450.

*Laurie A. Wurtz*  
LAURIE A. WURTZ  
*September 13, 2003*  
Date

**Response**

This is the second response to the communication mailed to us on October 16, 2000, regarding the Notice of Abandonment of the above-identified application.


Our records show that the Issue Fee was mailed on August 28, 2000, and was stamped as being received by the U.S. Patent and Trademark Office on September 1, 2000.

Please find copies of the Issue Fee Transmittal form (PTOL-85B), two stamped postcards and the Fee Address Indication form.

With all due respect, we believe this is sufficient proof that the Issue Fee payment was made in a timely manner and request the patent be issued.

If there are any problems with the enclosed proof of payment of the Issue Fee, the Applicant's attorney would appreciate a telephone call.

Respectfully submitted,



Attorney for Applicant(s)

Registration No. 22,049

William F. Noval/law  
Rochester, NY 14650  
Telephone: 585-477-5272  
Facsimile: 585-477-4646

Enclosures: (2) stamped/dated postcards  
Issue Fee Transmittal form (PTOL-85B)  
Fee Address Indication Form



Inventor(s) \_\_\_\_\_

Serial No. \_\_\_\_\_

Paper Submitted \_\_\_\_\_

Sender (Initial) \_\_\_\_\_

Docket/CCC: \_\_\_\_\_

Fee Address Indication Form  
Mailed: 28 August 2000

JPCarfagna

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Patent Legal Staff

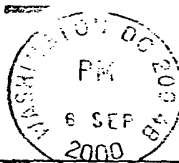
US PATENT & TRADEMARK OFFICE  
217 SEP - 1 PM 2:32  
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Address to:  
Patent Legal Staff  
Box 92894  
Ft. W. N. C.  
Guantanamo

EASTMAN KODAK CO.

SEP 12 2000

PATENT LEGAL STAFF



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